## Application for

beorgia	RECORDS DISPOSITION STANDARD	RECORDS MANAGEMENT DIVISION	<b>.</b>		
	INSTRUCTIONS: See esparate instructions for completion of front and reverse of this form. Sign original and two copies and forward to Department of Archives and History, Attention: Records Management Officer.	Date Received Application N			
	nt of Human Resources ical and Mental Health	Douglas M. Haire Records Management Officer			
Atlanta, Ga. 3033	34	5. Morking Title	6 656-4976		
		OSE OF PRESENT ACCUUNTHER ACCUMULATION			
8.Earliest & Latest Dates of Series 1962 to date (F/Y)	9 Exact Series Title Expenditure Voucher Files				
This series accumaccounting for fu	of the office in which this record s mulates in offices responsible f ands and is created as a result debted for goods, equipment and	for receiving, dish of paying funds to			

This standard does not apply to files documenting expenditures for construction

This file contains the following documents (include form numbers and titles, if any, and file arrangement). Known variously as "Paid Bills" "Ga.Bills" "Petty Cash" "Travel Reimbursement" "Tickets" (meaning invoices) "Gracewood (or the name of some other institution) Bills" this series consists of the following: Voucher copy of check Requisition Purchase Order and Confirmations Invoice from vendor Receiving record Receipts for petty cash expenditures Item specifications, price lists and catalog materials EDP Form - Adm. 1.27 - Key punch data Authorization for service HCl.14

## ATTACH SAMPLES OF THE FILE

							. السياد و السياد		والكبور ويلأ
12. EQUIPMENT OCCUPIED	No of Dr	EVETS	Cu. Ft. of Records			No. of Drawers Cu. Pt. of Records			
Letter-size File Drawers			-		ARRUAL RATE OF ACCUMULATION	45	lette	r _90	)
Legal-size File Drawers					Ficor Space Occupied (Square Feet)	In Off	ice(m)	In Stores	e Area(a)
Central Filing Area Transfer files care	1	34	668	· ·		This Year's	Last Year's	Preceding Year's	
					AVERAGE DAILY REFERENCES		5	5	1

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and similar and related documents of all kinds.

QUESTIONNAIRE Place an "x" in the proper column. If answer is "YES," please explain	YES NO						
13. Is this the Record Copy of the series?	[x]						
14. Is there a duplication of this series in another office or agency?  In institutions and hospitals							
15. Is the information contained in this series ever summarized or published?							
Attach copy of summary or publication. In formal accounting records 16. Does the series contain classified information requiring security handling?							
17. Does the series initiate, amend or terminate agency policies and procedures?							
18. Could the function be performed if the files were lost or destroyed?							
19. Is the series (or major portion of it) regularly microfilmed? If yes, why? Some  To save space and equipment							
20. Does the record series provide data as input to an EDP file?	[X]						
21. Does the record series contain documentation produced as EDP printout?	[ ] [ x]						
22. Has the Federal Government issued instructions governing the retention/disposition of these files?	נאַ []						
23. Will there be a need for these records 10, 15 years from now? If yes, what?	[ ] [ <b>x</b> ]						
24. REQUIREMENTS. The following requires the files to be kept 5 years:							
a.[]STATE b.[]STATUTE OF c.[]AUDIT d. [X]FEDERAL e.[]ADMINISTRATIVE f.[]HISTO LAW LIMITATION PERIOD LAW DECISION VALUE (Cite Law, Statute, or other reason for the retention requirement)  If audited by U.S, retain 3 years; if not audited, retain 5 years.  25. AGENCY RECOMMENDATIONS. This agency recommends that the file series be cut off at of each -[]CALENDAR YEAR -[X]FISCAL YEAR -[]OTHER  [X] Hold in the current files area month(s)/ 1 year(s): or until state [X] Transfer to [X] State Records Center [X] Local Holding Area; hold 4 year(s)	the end ,then:						
<pre>[X] Destroy. [ ] Transfer to State Archives for permanent retention. [ ] Destroy immediately after cut-off. [ X] Other: (Specify) Records pertaining to unresolved claims or audit or</pre>							
will be further retained until resolved.	• • • • • • • • • • • • • • • • • • •						
en de la companya de La companya de la co	•, •						
(Indicate briefly rationale for recommendations above/or write additional remark	s):						
	}						
Dave OTHER REQUIRED SIGNATURES	DATE						
6. Recommendations Agency Head/Designee	8-22-72						
are:    State Auditor/Designee							
STATE RECORDS   Secreption of State/Designee 6 ()	13-24-72 2-24-70						
Attorney General/Designee ///////	8-24-72						
[12 Approved [ ] Disapproved // West Well	8-25-72						